ENTRY BLANK			
PLEASE TYPE	OR PRINT	(,)	revious May Show
☐ Ms. Mr. Artist_	John 1	A Kai	ŠT
Permanent Address 2	178 5	Overl	ock Clevel
44106 St	Tel. (216)	229	4130
Zip Temporary or Studio Address	Area Code		
Otadio / tadioss	Street Tel. ( )		City
Zip	Area Code		
If you do not po Western Reserve			
Collaborator	(If Any)		

If May Show entries are not accepted or not sold:

- Artist will pick up at Museum.
- Museum should dispose of.Museum should ship to artist C.O.D. at this address:

## Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature John H Kaiser

DO NOT DETACH

REJECTED

DATE

REJECTED